

25 Fifth Ave., Narragansett, RI 02882
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**Town of Narragansett
Rhode Island
TAX ASSESSOR
Sales Verification Form**

Property Owner: _____ Assessor's Use Only/CC _____
Property Location: _____ Date Mailed: ____/____/____
Assessor's Plat(s) and Lot(s): _____ Date Returned ____/____/____

Please Complete the Following: Sales Information: Date Purchased ____/____/____
(All Information is CONFIDENTIAL) Purchase Price: \$ _____ Home ☐ Land Only ☐

Did your purchase involve any of the following conditions: YES NO NOT APPLICABLE

1. Was personal property included in the sale price:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Was financing from a non-conventional source:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Did you purchase property from a family member:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Did your purchase involve a foreclosure or bank auction:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Was there more than one property included in your purchase:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is your property subject to deed restrictions or easements:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you answered "YES" to any of the above please explain on the back.

PROPERTY CHARACTERISTICS

Latest Updating or Remodeling (year): **Kitchen** **Baths** **Electric** **Insulation** **Furnace**

Year Built: **No. of Units:** **Construction Cost:** \$ **Insured Amt:** \$

Interior Condition: Good ☐ Average ☐ Fair ☐ **Fireplace(s)**

No. of Rooms **No. of Bedrooms** **No. of Baths (Full)** **No. of Baths (Half)**

Basement Area: Full ☐ Partial ☐ %Finished %Heated %Crawl Space

Heat: Oil ☐ Gas ☐ Hot Water ☐ Hot Air ☐ Steam ☐ Gravity ☐ Radiant ☐ **A/C:** ☐

Swimming Pool: In Ground ☐ Above Ground ☐ **Hot Tub:**

Garage(s): 1 Car ☐ 2 Car ☐ 3 Car ☐ Attached ☐ Detached ☐ Basement ☐

UTILITIES: **Water:** Public ☐ Private ☐ **Street:** Public ☐ Private ☐ Paved ☐ Gravel ☐

If you wish to elaborate further, please do so on back, or attach a separate sheet.

Completed By: _____ Date: _____